New York, NY 10075 Case 1:16-cv-05703-RJD-RLM Document 101-2, Filed 06/05/17 Page 1 of 1 PageID #: 929 Tel: 212-794-2281 Fax: 212-517-9551 /1984 01, Date of Birth: Pierce, Lerin Name: 2 Mar 2017 Date of Exam: Y. Zaharakis, MD Referring Physician: Y. Zaharakis, MD Examining Physician: Patient History: 33 year old man reports persistent left arm weakness after a more recent shoulder injury. This examination is performed to assess for radiculopathy vs. neuropathy. Summary: Motor nerve conduction studies in bilateral median and ulnar nerves reveal left ulnar compound muscle action potential (CMAP) conduction velocity slowing across the elbow. Bilateral median and ulnar F-wave minimal latencies are normal. Sensory nerve conduction studies reveal decreased left ulnar sensory nerve action potential (SNAP) amplitude compared to the opposite ulnar SNAP amplitude. Bilateral 2L-2DI interlatency differences are normal. Needle electromyography of the left arm and paraspinal musculature is normal. Conclusions: There is evidence of mild sensorimotor neuropathic dysfunction affecting the left ulnar nerve localizable to the elbow consistent with mild ulnar neuropathy at the elbow. There is no evidence of cervical radiculopathy or plexopathy. Zaharakis, MD